ENTRY BLANK PLEASE TYPE OR PRINT Entered previous May Show yes no Ms. Mr. Artist CAMPBELL G. PAXTON MENTOR Address 8069 JOHNNYCAKE Tel. (216) 44060 255-2987 Area Code Zip **Temporary** Address _ Street City Tel. (Zip Area Code Permanent address is in what county? LAKE Born in Cuyahoga County Yes No Collaborator TALLIX FOUNDRY (If Any) If May Show entries are not accepted or not sold: Artist will pick up at Museum. Museum should dispose of. ☐ Museum should ship to artist C.O.D. at this address:

Special Instructions

When necessary include below instructions or a drawing of how the object is to be assembled and displayed.

THE RETURNED CARD IS YOUR ONLY RECEIPT TO CLAIM YOUR ENTRIES. Do not lose it.

This entry blank must be fully made out and signed. Unsigned entry blanks will not be accepted.

Note carefully calendar for delivery and return of objects. It is understood that the Museum will have the right to dispose for its own account any objects not called for by the dates listed.

It is also understood that accepted objects will remain on exhibition until January 2, 1977.

The submission of objects will be construed as acceptance of all conditions printed in the entry information.

Signature Compbell & Paxton

ENTRY BLANKS			
	aintings		
Medium or Materials BRONZE & STERLING SILVER			
TRITON SALT CELLAR			
	ance Value 'S Only	Size 4½" x 5"	
GRAPHICS AND PHOTOGRAPHY ONLY			
Additional No. For Sale	Total No. in Edition	Price Unframed	Price of Frame
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